

## Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF NEVADA

Case number (if known)

Chapter 7 Check if this an amended filing

## Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

04/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	<u>Full Conceal Inc</u>		
2. All other names debtor used in the last 8 years	<u>DBA FC Arms</u>		
	Include any assumed names, trade names and <i>doing business as</i> names		
3. Debtor's federal Employer Identification Number (EIN)	<u>81-2015245</u>		
4. Debtor's address	<b>Principal place of business</b>	<b>Mailing address, if different from principal place of business</b>	
	<u>175 Cassia Way Suite A1114</u>	<u>4651 Valley Vista Drive</u>	
	<u>Henderson, NV 89014</u>	<u>Dublin, CA 94568</u>	
	Number, Street, City, State & ZIP Code	P.O. Box, Number, Street, City, State & ZIP Code	
	<u>Clark</u>	<b>Location of principal assets, if different from principal place of business</b>	
	County	Number, Street, City, State & ZIP Code	
5. Debtor's website (URL)	<u>www.fullconceal.com</u>		
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____		

Debtor Full Conceal Inc \_\_\_\_\_ Case number (if known) \_\_\_\_\_  
 Name \_\_\_\_\_

**7. Describe debtor's business** A. *Check one:*

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Railroad (as defined in 11 U.S.C. § 101(44))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- Clearing Bank (as defined in 11 U.S.C. § 781(3))
- None of the above

B. *Check all that apply*

- Tax-exempt entity (as described in 26 U.S.C. §501)
- Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.  
 See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

**8. Under which chapter of the Bankruptcy Code is the debtor filing?**

*Check one:*

- Chapter 7
- Chapter 9
- Chapter 11. *Check all that apply:*

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- A plan is being filed with this petition.
- Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

- Chapter 12

**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

No.

Yes.

If more than 2 cases, attach a separate list.

District _____	When _____	Case number _____
District _____	When _____	Case number _____

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**

No

Yes.

List all cases. If more than 1, attach a separate list

Debtor _____	Relationship _____	
District _____	When _____	Case number, if known _____

Debtor **Full Conceal Inc**  
Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**11. Why is the case filed in this district?** *Check all that apply:*

Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**

No

Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention? (Check all that apply.)**

It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.  
What is the hazard? \_\_\_\_\_

It needs to be physically secured or protected from the weather.

It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

Other \_\_\_\_\_

**Where is the property?** \_\_\_\_\_  
Number, Street, City, State & ZIP Code

**Is the property insured?**

No

Yes. Insurance agency \_\_\_\_\_  
Contact name \_\_\_\_\_  
Phone \_\_\_\_\_

#### Statistical and administrative information

**13. Debtor's estimation of available funds** *Check one:*

Funds will be available for distribution to unsecured creditors.

After any administrative expenses are paid, no funds will be available to unsecured creditors.

**14. Estimated number of creditors**

<input type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5001-10,000	<input type="checkbox"/> 50,001-100,000
<input checked="" type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

**15. Estimated Assets**

<input type="checkbox"/> \$0 - \$50,000	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

**16. Estimated liabilities**

<input type="checkbox"/> \$0 - \$50,000	<input type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
<input checked="" type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

Debtor Full Conceal Inc  
Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**Request for Relief, Declaration, and Signatures**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 13, 2020  
MM / DD / YYYY

**X /s/ Michael Full**

Signature of authorized representative of debtor

**Michael Full**

Printed name

Title CEO**18. Signature of attorney****X /s/ Robert Atkinson**

Signature of attorney for debtor

Date October 13, 2020

MM / DD / YYYY

**Robert Atkinson 9958**

Printed name

**Atkinson Law Associates Ltd.**

Firm name

**376 E Warm Springs Rd Suite 130  
Las Vegas, NV 89119**

Number, Street, City, State &amp; ZIP Code

Contact phone (702) 614-0600

Email address

bknottices@nv-lawfirm.com**9958 NV**

Bar number and State

### **Board of Directors Consent Resolutions**

I am the sole member of the board of directors for Full Conceal, Inc. ("Company") I hereby waive notice of a meeting of the board of directors of the Company, to consider and transact any business whatsoever that may be brought before the meeting. I hereby waive any and all requirements by statute, bylaws, or otherwise, as to notice of the date, time, place, and purposes of the meeting, and consent that the meeting held on the date and at the time and place set out about and to the transaction thereat or at any adjournment thereof of any business whatsoever that may be brought before the meeting, including, without any limitation on the scope of the foregoing, the adoption of bylaws, election of officers, and authorization of issuance of stock.

WHEREAS, the Company was formed on March 22, 2016;

WHEREAS, the Company drafted and adopted but did not execute initial consents of the first meeting of the board of directors of the Company;

WHEREAS, the Company drafted and adopted, but did not execute bylaws of the Company;

WHEREAS, the Corporation is insolvent and unable to pay its debts as they mature;

WHEREAS, it would be in the best interests of creditors for the Company to file a voluntary petition under Chapter 7 of the Bankruptcy Code, it is:

RESOLVED that the bylaws of the Company that were adopted but not signed are adopted and ratified in full.

RESOLVED that the initial written consent of the board that were drafted but not signed are adopted and ratified in full.

RESOLVED that the Company accepts the resignation of Steven Pantalemon.

RESOLVED that Michael Full is accepted by the board as the President, Secretary and Treasurer of the Company.

RESOLVED that the capitalization table of the Company is approved and reflects the current ownership of shares in the company by its shareholders which is as follows:

Name	Common	Total Shares	Fully Diluted Percentage Ownership
Brad Bartman	500	500	0.50%
Dorothy K. Bartman	500	500	0.50%
Douglas Cheung	3,833	3,833	3.83%
Dumpy's LLC	2,000	2,000	2.00%
Eugene Kim	1,250	1,250	1.25%
Hudson Development	2,000	2,000	2.00%

Name	Common	Total Shares	Fully Diluted Percentage Ownership
Joshua Fuselier	1,000	1,000	1.00%
Michael Full	51,000	51,000	51.00%
Ron Novak	1,000	1,000	1.00%
Stephen M. Pantalemon	33,917	33,917	33.92%
Thomas H Gingles	1,000	1,000	1.00%
Todd Martin	1,000	1,000	1.00%
Uly Kim	1,000	1,000	1.00%
 Total	100,000	100,000	100.00%

RESOLVED, that the Corporation file as soon as practicable a bankruptcy in accordance with Chapter 7 of the Bankruptcy Code.

FURTHER RESOLVED, the exchange of copies of these Resolutions and of the signature page by facsimile, electronic mail (including .pdf or any electronic signature complying with the U.S. federal ESIGN Act of 2000, e.g., [www.docusign.com](http://www.docusign.com)) or other transmission method shall constitute effective execution and delivery of these Resolutions may be used in lieu of the original for all purposes. Any signature transmitted by facsimile, electronic mail or other transmission method shall be deemed to be their original signatures for all purposes.

Dated October 5, 2020.

*Michael Full*

\_\_\_\_\_  
Michael Full, Director

The undersigned hereby certifies that he is the duly elected and qualified Secretary and the custodian of the books and records and seal of Full Conceal, Inc., a corporation duly formed pursuant to the laws of the state of Nevada and that the foregoing is a true record of a consent resolution duly adopted at a meeting of the Directors and that said resolutions were adopted in accordance with state law and the Bylaws of the above-named Corporation on October 5, 2020, and that said resolution is now in full force and effect without modification or rescission.

IN WITNESS WHEREOF, I have executed my name as Secretary and have hereunto affixed the corporate seal of the above-named Corporation this 5<sup>th</sup> Day of October, 2020.

*Michael Full*

\_\_\_\_\_  
Michael Full, Secretary

## Fill in this information to identify the case:

Debtor name Full Conceal IncUnited States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) \_\_\_\_\_

 Check if this is an amended filing

## Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- Amended Schedule*
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 13, 2020X /s/ Michael Full

Signature of individual signing on behalf of debtor

Michael Full

Printed name

CEO

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Full Conceal Inc**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**

Case number (if known) \_\_\_\_\_

 Check if this is an amended filing

## Official Form 206Sum

### Summary of Assets and Liabilities for Non-Individuals

12/15

#### Part 1: Summary of Assets

##### 1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

###### 1a. **Real property:**

Copy line 88 from *Schedule A/B*..... \$ **0.00**

###### 1b. **Total personal property:**

Copy line 91A from *Schedule A/B*..... \$ **1,900,999.16**

###### 1c. **Total of all property:**

Copy line 92 from *Schedule A/B*..... \$ **1,900,999.16**

#### Part 2: Summary of Liabilities

##### 2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **254,000.00**

##### 3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

###### 3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **120,000.00**

###### 3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **339,448.45**

##### 4. **Total liabilities** .....

Lines 2 + 3a + 3b

\$ **713,448.45**

## Fill in this information to identify the case:

Debtor name **Full Conceal Inc**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**

Case number (if known) \_\_\_\_\_

 Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?** No. Go to Part 2. Yes Fill in the information below.**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm) Type of account

Last 4 digits of account number

3.1. **Chase** **Business checking** **3126** **\$300.00**3.2. **Chase** **Business savings** **7119** **\$0.00****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$300.00****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?** No. Go to Part 3. Yes Fill in the information below.**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

**Prepayment for services - Accounting Services (SF Bay Tax - Accountant) - prepaid for****8.1. 2020 corporate tax return****\$6,000.00**

Debtor Full Conceal Inc \_\_\_\_\_ Case number (*If known*) \_\_\_\_\_  
 Name \_\_\_\_\_

8.2. **Prepayment for services - Google Email and Vault (preserving email history - 12 months @ \$100/month)** \$1,200.00

9. **Total of Part 2.** \$7,200.00  
 Add lines 7 through 8. Copy the total to line 81.

**Part 3: Accounts receivable**

10. Does the debtor have any accounts receivable?

No. Go to Part 4.  
 Yes Fill in the information below.

11. **Accounts receivable**

11b. Over 90 days old:	<u>40,382.32</u>	-	<u>20,191.16</u> =....	<u>\$20,191.16</u>
	face amount		doubtful or uncollectible accounts	

12. **Total of Part 3.** \$20,191.16  
 Current value on lines 11a + 11b = line 12. Copy the total to line 82.

**Part 4: Investments**

13. Does the debtor own any investments?

No. Go to Part 5.  
 Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

No. Go to Part 6.  
 Yes Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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19. **Raw materials**

20. <b>Work in progress</b> <b>571 Firearms / Frames</b> <b>(some WIP, some demos, some finished goods)</b>	<u>\$0.00</u>	<b>Replacement</b>	<b>Unknown</b>
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21. **Finished goods, including goods held for resale**

22. <b>Other inventory or supplies</b> <b>Accessories (demo units / trade show items)</b>	<u>\$0.00</u>	<b>Unknown</b>
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<b>T-shirts and swag for trade shows</b>	<u>\$0.00</u>	<b>\$1,000.00</b>
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Debtor Full Conceal Inc \_\_\_\_\_ Case number (*If known*) \_\_\_\_\_  
 Name \_\_\_\_\_

23. **Total of Part 5.** \_\_\_\_\_ **\$1,000.00** \_\_\_\_\_  
 Add lines 19 through 22. Copy the total to line 84.

24. **Is any of the property listed in Part 5 perishable?**  
 No  
 Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**  
 No  
 Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current Value \_\_\_\_\_

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**  
 No  
 Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

No. Go to Part 7.  
 Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

No. Go to Part 8.  
 Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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39. **Office furniture**  
**Apartment Furniture (2x beds and 2x bed frames, 1x piano, 1x couch, 1x table, 3x chairs, 2x cabinets)**  
**Location: 4525 Dean Martin Dr Apt 1212, Las Vegas NV 89103** **\$0.00** **Liquidation** **\$1,000.00**

**2 tables, 4 racks** **\$0.00**  **\$200.00**

40. **Office fixtures**  
 41. **Office equipment, including all computer equipment and communication systems equipment and software**  
**Laptop, monitor**  
**Location: 4525 Dean Martin Dr Apt 1212, Las Vegas NV 89103** **\$0.00** **Liquidation** **Unknown**

**2 computer monitors, scanner, video system, thermal printer** **\$0.00**  **\$1,000.00**

42. **Collectibles** *Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles*  
**42.1. Boring Company Flame Thrower** **\$0.00**  **Unknown**

Debtor Full Conceal Inc  
NameCase number (*If known*) \_\_\_\_\_

43. **Total of Part 7.** \$2,200.00  
Add lines 39 through 42. Copy the total to line 86.

44. **Is a depreciation schedule available for any of the property listed in Part 7?**  
 No  
 Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**  
 No  
 Yes

**Part 8: Machinery, equipment, and vehicles****46. Does the debtor own or lease any machinery, equipment, or vehicles?**

No. Go to Part 9.  
 Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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47. **Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

48. **Watercraft, trailers, motors, and related accessories** *Examples:* Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**  
Collet, portable refractor, telescoping gauge, 2 calipers, grinder, 3 edge stops, touch probe, height gauge \$0.00 \$1,000.00

51. **Total of Part 8.** \$1,000.00  
Add lines 47 through 50. Copy the total to line 87.

52. **Is a depreciation schedule available for any of the property listed in Part 8?**  
 No  
 Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**  
 No  
 Yes

**Part 9: Real property****54. Does the debtor own or lease any real property?**

No. Go to Part 10.  
 Yes Fill in the information below.

**Part 10: Intangibles and intellectual property****59. Does the debtor have any interests in intangibles or intellectual property?**

No. Go to Part 11.

Debtor Full Conceal Inc  
NameCase number (*If known*) \_\_\_\_\_ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	<b>Patents, copyrights, trademarks, and trade secrets</b> <b>US Patent (No. 10,274,276) - Folding Handgun</b>	<b>\$0.00</b>	<b>Liquidation</b>	<b>\$500,000.00</b>
	<b>US Patent (No. 10,488,132) - Safety Trigger</b>	<b>\$0.00</b>	<b>Liquidation</b>	<b>Unknown</b>
	<b>Patent pending - Application Serial No.:</b> <b>16/745,399</b> <b>Magazine Retention Device with Integrated Aiming System</b>	<b>\$0.00</b>		<b>Unknown</b>
61.	Internet domain names and websites			
62.	Licenses, franchises, and royalties <b>FFL (Federal Firearm License) manufacturer's license from U.S. Bureau of ATF</b> <b>Lic. no. 9-88-003-07-3E-04815</b>	<b>\$0.00</b>		<b>\$0.00</b>
63.	Customer lists, mailing lists, or other compilations <b>Marketing list via MailChimp</b>	<b>\$0.00</b>		<b>Unknown</b>
64.	Other intangibles, or intellectual property			
65.	Goodwill			
66.	<b>Total of Part 10.</b>			<b>\$500,000.00</b>
	Add lines 60 through 65. Copy the total to line 89.			
67.	<b>Do your lists or records include personally identifiable information of customers</b> (as defined in 11 U.S.C. §§ 101(41A) and 107?)			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			
68.	<b>Is there an amortization or other similar schedule available for any of the property listed in Part 10?</b>			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			
69.	<b>Has any of the property listed in Part 10 been appraised by a professional within the last year?</b>			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

**Part 11: All other assets****70. Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

No. Go to Part 12.  
 Yes Fill in the information below.

Current value of debtor's interest

Debtor	<b>Full Conceal Inc</b> Name	Case number ( <i>If known</i> )
71.	<b>Notes receivable</b> Description (include name of obligor)	
72.	<b>Tax refunds and unused net operating losses (NOLs)</b> Description (for example, federal, state, local)	
<b>Net operating losses as of Dec 31, 2019</b>		Tax year <b>2019</b>
		<b>\$1,230,370.00</b>
73.	<b>Interests in insurance policies or annuities</b>	
74.	<b>Causes of action against third parties (whether or not a lawsuit has been filed)</b> <b>Litigation claims against business partner Steve Pantalemon</b>	
	Nature of claim	<b>Litigation claims</b>
	Amount requested	<b>\$0.00</b>
<b>Unknown</b>		
<b>Clawback claims against former business partner Steve Pantalemon</b>		
<b>Eighth District Court, Clark County Case no.</b>		
<b>A-20-813641-C</b>		
<b>\$78,738.00</b>		
	Nature of claim	
	Amount requested	<b>\$0.00</b>
<b>Claim relating to selling a VM3 machine for \$13,000 less than market value</b>		
<b>\$13,000.00</b>		
	Nature of claim	<b>Litigation claims</b>
	Amount requested	<b>\$0.00</b>
<b>Unknown</b>		
<b>Litigation claims against Full Conceal Mfg LLC, Mitch Grief, and/or Leeor Engelstein</b>		
	Nature of claim	<b>Litigation claims</b>
	Amount requested	<b>\$0.00</b>
75.	<b>Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims</b>	
76.	<b>Trusts, equitable or future interests in property</b>	
77.	<b>Other property of any kind not already listed</b> Examples: Season tickets, country club membership <b>Funds sitting in escrow relating to the sale of a VM3 machine</b>	
		<b>\$47,000.00</b>
78.	<b>Total of Part 11.</b>	
Add lines 71 through 77. Copy the total to line 90.		<b>\$1,369,108.00</b>
79.	<b>Has any of the property listed in Part 11 been appraised by a professional within the last year?</b>	
	<input checked="" type="checkbox"/> No	
	<input type="checkbox"/> Yes	

Debtor Full Conceal Inc  
NameCase number (*If known*) \_\_\_\_\_Part 12: **Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<u>\$300.00</u>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<u>\$7,200.00</u>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<u>\$20,191.16</u>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<u>\$1,000.00</u>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<u>\$2,200.00</u>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<u>\$1,000.00</u>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<u>\$0.00</u>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<u>\$500,000.00</u>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<u>+ \$1,369,108.00</u>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<u><b>\$1,900,999.16</b></u>	+ 91b. <u><b>\$0.00</b></u>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<u><b>\$1,900,999.16</b></u>

## Fill in this information to identify the case:

Debtor name **Full Conceal Inc**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**

Case number (if known) \_\_\_\_\_

 Check if this is an amended filing

## Official Form 206D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

## 1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

2.1 **American Express National Bank**  
 Creditor's Name  
**c/o: Datamark Inc.  
 Attn: Merchant Financing  
 Counsel  
 43 Butterfield Circle  
 EL Paso, TX 79906**  
 Creditor's mailing address

	<i>Column A</i> Amount of claim	<i>Column B</i> Value of collateral that supports this claim
Describe debtor's property that is subject to a lien <b>Blanket lien</b>	<b>\$254,000.00</b>	<b>Unknown</b>
Do not deduct the value of collateral.		

Describe the lien  
**UCC-1**  
 Is the creditor an insider or related party?  
 No  
 Yes  
 Is anyone else liable on this claim?  
 No  
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)  
 As of the petition filing date, the claim is:  
 Check all that apply  
 Contingent  
 Unliquidated  
 Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. **\$254,000.00****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:

Debtor name **Full Conceal Inc**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**

Case number (if known) \_\_\_\_\_

 Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

 No. Go to Part 2. Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address <b>Michael Full 4651 Valley Vista Dr Dublin, CA 94568</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$120,000.00</b> <b>\$13,650.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
Date or dates debt was incurred <b>March 2019 to April 2020</b>	Basis for the claim: <b>Deferred Salary</b>	
Last 4 digits of account number	Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Amount of claim	
3.1 Nonpriority creditor's name and mailing address <b>Abide Armory 3009B N State Route 89 Prescott, AZ 86301</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$449.00</b>
Date(s) debt was incurred <b>2020</b>	Basis for the claim: <b>Customer - order not shipped</b>	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2 Nonpriority creditor's name and mailing address <b>Adam Thomas 3390 Abbie Ln Battle mountain, NV 89820</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$44.00</b>
Date(s) debt was incurred <b>2020</b>	Basis for the claim: <b>Customer - order not shipped</b>	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)	
3.3	<b>Nonpriority creditor's name and mailing address</b> <b>Advanced Weapons</b> <b>2149 Freemont Dr</b> <b>Canon City, CO 81212</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$898.00</b>
3.4	<b>Nonpriority creditor's name and mailing address</b> <b>Alex Harding</b> <b>497 Melvin Avenue</b> <b>Morrisville, PA 19067</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$299.00</b>
3.5	<b>Nonpriority creditor's name and mailing address</b> <b>Alex Martin</b> <b>9212 se retreat dr</b> <b>hobe sound, FL 33455</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$59.00</b>
3.6	<b>Nonpriority creditor's name and mailing address</b> <b>Alhareth AlSalman</b> <b>23314 nocturnal ct</b> <b>Katy, TX 77493</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$598.00</b>
3.7	<b>Nonpriority creditor's name and mailing address</b> <b>ANDREW DORMAN</b> <b>Papa Foxtrot Tactical LLC</b> <u>2303 Highway 1</u> <b>Galivants Ferry, SC 29544-6831</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15.00</b>
3.8	<b>Nonpriority creditor's name and mailing address</b> <b>Andrew Hernandez</b> <b>14025 Fairway Island Dr. 325</b> <b>Orlando, FL 32837</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,429.00</b>
3.9	<b>Nonpriority creditor's name and mailing address</b> <b>Andrew Obrist</b> <b>4938 Juno Road</b> <b>Virginia Beach, VA 23455</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$299.00</b>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)	
3.10	<p>Nonpriority creditor's name and mailing address  <b>Andrew Papp</b>  <b>112 Beaumont dr</b>  <b>Dahlonega, GA 30533</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$999.00</b>
3.11	<p>Nonpriority creditor's name and mailing address  <b>Andrew Waller</b>  <b>3241 South Mount Carmel Avenue</b>  <b>Wichita, KS 67217</b></p> <p>Date(s) debt was incurred <u>03/27/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$299.00</b>
3.12	<p>Nonpriority creditor's name and mailing address  <b>Anthony Cellana</b>  <b>KT Arms LLC 291 NW 48th Ave</b>  <b>DEERFIELD BEACH, FL 33442</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$599.00</b>
3.13	<p>Nonpriority creditor's name and mailing address  <b>Apple &amp; Sons Saunders Ace Hardware</b>  <b>202 Piedmont St</b>  <b>Reidsville, NC 27320</b></p> <p>Date(s) debt was incurred <u>04/03/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$349.00</b>
3.14	<p>Nonpriority creditor's name and mailing address  <b>Arianna Monin</b>  <b>3661 Glasstop Dr</b>  <b>Las Vegas, NV 89141</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$449.00</b>
3.15	<p>Nonpriority creditor's name and mailing address  <b>Arrow Security Inc.</b>  <b>15410 N 67 Ave</b>  <b>Glendale, AZ 85306</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$898.00</b>
3.16	<p>Nonpriority creditor's name and mailing address  <b>Ben Bushong</b>  <b>427 Hannah Road</b>  <b>Daleville, AL 36322</b></p> <p>Date(s) debt was incurred <u>03/27/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$299.00</b>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)	
3.17	<p>Nonpriority creditor's name and mailing address  <b>Bill Hicks</b>  <b>15155 23rd Avenue North</b>  <b>Plymouth, MN 55447</b></p> <p>Date(s) debt was incurred <u>2019</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$61,280.00</b>
3.18	<p>Nonpriority creditor's name and mailing address  <b>Bloodhound Arms, LLC</b>  <b>140 Commonwealth Drive</b>  <b>Warrendale, PA 15086</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$475.00</b>
3.19	<p>Nonpriority creditor's name and mailing address  <b>Brandon Barbee</b>  <b>PO Box 456</b>  <b>Center, TX 75935</b></p> <p>Date(s) debt was incurred <u>03/26/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$269.00</b>
3.20	<p>Nonpriority creditor's name and mailing address  <b>Brandon Carriere</b>  <b>4435 MEADOW BROOK WAY</b>  <b>Lake Charles, LA 70607</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$949.00</b>
3.21	<p>Nonpriority creditor's name and mailing address  <b>Brandon Yanskey</b>  <b>520 Geary Dr</b>  <b>Rockwall, TX 75087</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,347.00</b>
3.22	<p>Nonpriority creditor's name and mailing address  <b>Brian Barmmer</b>  <b>entensiv 68 Virginia Farne Ln</b>  <b>Carlisle, MA 01741</b></p> <p>Date(s) debt was incurred <u>03/27/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$299.00</b>
3.23	<p>Nonpriority creditor's name and mailing address  <b>Brian Wensel</b>  <b>4109 S Roberts Rd</b>  <b>Fort Mohave, AZ 86426</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$898.00</b>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)
3.24	<p>Nonpriority creditor's name and mailing address  <b>Bryan Oudomsouk</b>  <b>504 Lutie CT</b>  <b>Nashville, TN 37210</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.25	<p>Nonpriority creditor's name and mailing address  <b>Carl Guething</b>  <b>1700 W 67th Ave</b>  <b>Denver, CO 80221</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.26	<p>Nonpriority creditor's name and mailing address  <b>Carlton McCord</b>  <b>27845 Moran St</b>  <b>Harrison Township, MI 48045</b></p> <p>Date(s) debt was incurred <u>03/27/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.27	<p>Nonpriority creditor's name and mailing address  <b>Charles Butkus</b>  <b>3833 Peachtree Rd Ne Apt 1506</b>  <b>Brookhaven, GA 30319</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.28	<p>Nonpriority creditor's name and mailing address  <b>Charles Moore</b>  <b>6216 south lagoon Dr.</b>  <b>Panama city bea, FL 32408</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.29	<p>Nonpriority creditor's name and mailing address  <b>Chris Culross</b>  <b>75 Center St</b>  <b>Laramie, WY 82072</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.30	<p>Nonpriority creditor's name and mailing address  <b>Christopher Galan</b>  <b>157 Doris Dr</b>  <b>Universal city, TX 78148</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)	
3.31	<p>Nonpriority creditor's name and mailing address  <b>Christopher Kam</b>  <b>267 Mokaea st</b>  <b>Honolulu, HI 96819</b></p> <p>Date(s) debt was incurred <u>03/27/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$299.00</b>
3.32	<p>Nonpriority creditor's name and mailing address  <b>Christopher Liston</b>  <b>15 Mill Street</b>  <b>Mays Landing, NJ 08330</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$999.00</b>
3.33	<p>Nonpriority creditor's name and mailing address  <b>Christopher Meyer</b>  <b>713 Virginia Ave</b>  <b>Gallatin, TN 37066</b></p> <p>Date(s) debt was incurred <u>04/03/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$449.00</b>
3.34	<p>Nonpriority creditor's name and mailing address  <b>Christopher Polhemus</b>  <b>419 Abigail Street</b>  <b>Ridgecrest, CA 93555</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$299.00</b>
3.35	<p>Nonpriority creditor's name and mailing address  <b>Christopher Sofich</b>  <b>8717 SE Monterey Ave Unit 209</b>  <b>Portland, OR 97086</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$15.00</b>
3.36	<p>Nonpriority creditor's name and mailing address  <b>Citibank, N.A.</b>  <b>Attn: Centralized Bankruptcy</b>  <b>PO Box 20507</b>  <b>Kansas City, MO 64195</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Business credit card</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$0.00</b>
3.37	<p>Nonpriority creditor's name and mailing address  <b>Collin Orizu</b>  <b>989 S Buchanan St Unit 210</b>  <b>Arlington, VA 22204</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$999.00</b>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)	
3.38	<p>Nonpriority creditor's name and mailing address  <b>CV Property Management</b>  <b>4520 36th Ave S</b>  <b>Fargo, ND 58104</b></p> <p>Date(s) debt was incurred <u>2019</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Former Landlord</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$0.00</b>
3.39	<p>Nonpriority creditor's name and mailing address  <b>Dallas Hill</b>  <b>1979 12212 Anne Kenia Dr.</b>  <b>Thonotosassa, FL 33592</b></p> <p>Date(s) debt was incurred <u>03/27/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$299.00</b>
3.40	<p>Nonpriority creditor's name and mailing address  <b>Dan Kremer</b>  <b>3839 Treebrook Dr</b>  <b>Imperial, MO 63052</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$898.00</b>
3.41	<p>Nonpriority creditor's name and mailing address  <b>Danele Williams</b>  <b>1117 South Bloodworth Street</b>  <b>Raleigh, NC 27601</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$599.00</b>
3.42	<p>Nonpriority creditor's name and mailing address  <b>Daniel Crall</b>  <b>59 Hathorn Blvd.</b>  <b>Saratoga Springs, NY 12866</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$15.00</b>
3.43	<p>Nonpriority creditor's name and mailing address  <b>Daniel Gambella</b>  <b>5 Ladder Court</b>  <b>Huntington, NY 11743</b></p> <p>Date(s) debt was incurred <u>04/03/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$369.00</b>
3.44	<p>Nonpriority creditor's name and mailing address  <b>Daniel Nelson</b>  <b>Address unknown</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$449.00</b>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)	
3.45	<p>Nonpriority creditor's name and mailing address  <b>Daniel Sotelo</b>  <b>3108 W LOUISIANA AVE</b>  <b>Midland, TX 79701</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$44.00</b>
3.46	<p>Nonpriority creditor's name and mailing address  <b>Darren Harrell</b>  <b>131 Jowers Road</b>  <b>West Monroe, LA 71291</b></p> <p>Date(s) debt was incurred <u>03/27/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$98.00</b>
3.47	<p>Nonpriority creditor's name and mailing address  <b>Darren Harrell</b>  <b>131 Jowers Road</b>  <b>West Monroe, LA 71291</b></p> <p>Date(s) debt was incurred <u>04/03/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$369.00</b>
3.48	<p>Nonpriority creditor's name and mailing address  <b>dave licht</b>  <b>6735 cascade manor dr</b>  <b>sugar land, TX 77479</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$299.00</b>
3.49	<p>Nonpriority creditor's name and mailing address  <b>David Cathcart</b>  <b>6200 Pershing Ave Apt 378</b>  <b>Fort Worth, TX 76116</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$599.00</b>
3.50	<p>Nonpriority creditor's name and mailing address  <b>David Harris</b>  <b>10004 Wurzbach Rd #321</b>  <b>San Antonio, TX 78230</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$599.00</b>
3.51	<p>Nonpriority creditor's name and mailing address  <b>Derek Holbrook</b>  <b>P.O. Box 455</b>  <b>Oak Harbor, WA 98277</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$299.00</b>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)	
3.52	<p>Nonpriority creditor's name and mailing address  <b>Desert Weaponry</b>  <b>11364 E Prince Rd</b>  <b>Tucson, AZ 85749</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$2,694.00</b>
3.53	<p>Nonpriority creditor's name and mailing address  <b>Dillon Point</b>  <b>575 State Route 37</b>  <b>Akwasasne, NY 13655</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$599.00</b>
3.54	<p>Nonpriority creditor's name and mailing address  <b>Doug Wight (Gold Ring Pawn)</b>  <b>445 Main St</b>  <b>Silt, CO 81652</b></p> <p>Date(s) debt was incurred <u>04/03/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$349.00</b>
3.55	<p>Nonpriority creditor's name and mailing address  <b>Dre Mill</b>  <b>2666 morrow place</b>  <b>Cincinnati, OH 45204</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$44.00</b>
3.56	<p>Nonpriority creditor's name and mailing address  <b>Dutch Hilleburg</b>  <b>7039 Signal Hill Rd</b>  <b>Manassas, VA 20111</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,260.00</b>
3.57	<p>Nonpriority creditor's name and mailing address  <b>Eddie Colameta</b>  <b>495 Broadway</b>  <b>Malden, MA 02148</b></p> <p>Date(s) debt was incurred <u>03/27/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$299.00</b>
3.58	<p>Nonpriority creditor's name and mailing address  <b>Eddie E Walker Jr</b>  <b>468 Oak Ridge Estates</b>  <b>Murphy, NC 28906</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$59.00</b>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)	
3.59	<p>Nonpriority creditor's name and mailing address  <b>Eion Hughes</b>  <b>274 Elkins Road</b>  <b>Rogersville, TN 37857</b></p> <p>Date(s) debt was incurred <u>03/27/20</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$299.00</b>
3.60	<p>Nonpriority creditor's name and mailing address  <b>Elite Firearms</b>  <b>6985 W Sahara Ave</b>  <b>Las Vegas, NV 89117</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$898.00</b>
3.61	<p>Nonpriority creditor's name and mailing address  <b>Endicia</b>  <b>323 N Mathilda Ave</b>  <b>Sunnyvale, CA 94085</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$162.83</b>
3.62	<p>Nonpriority creditor's name and mailing address  <b>Eric Berrett</b>  <b>3305 Westwood Industrial Dr</b>  <b>Monroe, NC 28110</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$898.00</b>
3.63	<p>Nonpriority creditor's name and mailing address  <b>Eric Hernandez</b>  <b>635 Voiles Street</b>  <b>Brighton, CO 80601</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$589.00</b>
3.64	<p>Nonpriority creditor's name and mailing address  <b>ERICH VINCENT</b>  <b>PO BOX 23666</b>  <b>PLEASANT HILL, CA 94523</b></p> <p>Date(s) debt was incurred <u>04/03/20</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$598.00</b>
3.65	<p>Nonpriority creditor's name and mailing address  <b>Erik Fortin</b>  <b>568 Station Road</b>  <b>Mount Holly, VT 05758</b></p> <p>Date(s) debt was incurred <u>04/03/20</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$299.00</b>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)
3.66	<b>Nonpriority creditor's name and mailing address</b> <b>ETS</b> <b>PO Box 2889</b> <b>South Bend, IN 46680</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.67	<b>Nonpriority creditor's name and mailing address</b> <b>Frank Hodne</b> <b>8174 N Union Church Rd</b> <b>Milford, DE 19963</b> <b>Date(s) debt was incurred</b> <u>04/03/20</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$349.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.68	<b>Nonpriority creditor's name and mailing address</b> <b>Frog Bones Family Shooting Center</b> <b>404 S Harbor City Blvd</b> <b>Melbourne, FL 32901</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$1,347.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.69	<b>Nonpriority creditor's name and mailing address</b> <b>George Turner</b> <b>G.O.T. Fitness</b> <b>Pottstown, PA 19464</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$15.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.70	<b>Nonpriority creditor's name and mailing address</b> <b>Greg Conran</b> <b>20538 Tanager Place</b> <b>Leesburg, VA 20175</b> <b>Date(s) debt was incurred</b> <u>04/03/20</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$349.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.71	<b>Nonpriority creditor's name and mailing address</b> <b>Greg Komassa</b> <b>1116 Harding Road</b> <b>Anthony, NM 88021</b> <b>Date(s) debt was incurred</b> <u>03/27/20</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$105.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.72	<b>Nonpriority creditor's name and mailing address</b> <b>Gregory Conran</b> <b>20538 tanager place</b> <b>Leesburg, VA 20175</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <b>\$15.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)	
3.73	<p>Nonpriority creditor's name and mailing address  <b>Herbert Pan</b>  <b>415 Cloverdale Ln</b>  <b>Walnut, CA 91789</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$999.00</b>
3.74	<p>Nonpriority creditor's name and mailing address  <b>Howard &amp; Howard Attorneys PLLC</b>  <b>3800 Howard Hughes Pkwy #1000</b>  <b>Las Vegas, NV 89169</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Legal services</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$20,000.00</b>
3.75	<p>Nonpriority creditor's name and mailing address  <b>Howard Steven Leight</b>  <b>3200 Airport Ave</b>  <b>Santa Monica, CA 90405</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$369.00</b>
3.76	<p>Nonpriority creditor's name and mailing address  <b>Iho Tree</b>  <b>2754 Richardson St</b>  <b>Fitchburg, WI 53711</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$579.00</b>
3.77	<p>Nonpriority creditor's name and mailing address  <b>Isaiah Warren</b>  <b>42 Rose Hill Dr.</b>  <b>Jackson, TN 38301</b></p> <p>Date(s) debt was incurred <u>04/03/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$399.00</b>
3.78	<p>Nonpriority creditor's name and mailing address  <b>Jack Crouch</b>  <b>6063 Via De Los Arboles</b>  <b>El Paso, TX 79932</b></p> <p>Date(s) debt was incurred <u>03/27/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$96.00</b>
3.79	<p>Nonpriority creditor's name and mailing address  <b>James Alaniz</b>  <b>11708 W Red Hawk Dr</b>  <b>Peoria, AZ 85385</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$449.00</b>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)	
3.80	<p>Nonpriority creditor's name and mailing address  <b>James Carte</b>  <b>16355 East Brown dr</b>  <b>Aurora, CO 80013</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$378.00</b>
3.81	<p>Nonpriority creditor's name and mailing address  <b>James Jones</b>  <b>44 Summerfield Dr.</b>  <b>FISHERSVILLE, VA 22939</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$15.00</b>
3.82	<p>Nonpriority creditor's name and mailing address  <b>James Plante</b>  <b>2620 South Maryland Parkway</b>  <b>Las Vegas, NV 89109</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$76.82</b>
3.83	<p>Nonpriority creditor's name and mailing address  <b>James Rodriguez</b>  <b>pathway communications 520 linda dr Apt.</b>  <b>San Marcos, TX 78666</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$599.00</b>
3.84	<p>Nonpriority creditor's name and mailing address  <b>Jason Allmon</b>  <b>7800 Mockingbird Lane lot 123</b>  <b>North Richland Hills, TX 76180</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$599.00</b>
3.85	<p>Nonpriority creditor's name and mailing address  <b>Jason Staads</b>  <b>3247 Central Ave NE</b>  <b>Minneapolis, MN 55418</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$299.00</b>
3.86	<p>Nonpriority creditor's name and mailing address  <b>Jason Thiede</b>  <b>532 South Miami Street</b>  <b>West Milton, OH 45383</b></p> <p>Date(s) debt was incurred <u>03/27/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$299.00</b>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)
3.87	<p>Nonpriority creditor's name and mailing address  <b>Jeff Schabowski</b>  <b>W225 S4839 Guthrie Rd</b>  <b>Waukesha, WI 53189</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.88	<p>Nonpriority creditor's name and mailing address  <b>Jeffrey Smith</b>  <b>Quick splash mobile car wash</b>  <b>Hampton, GA 30228</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.89	<p>Nonpriority creditor's name and mailing address  <b>Joe Hess</b>  <b>2201 Ramsgate Dr</b>  <b>Henderson, NV 89074</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.90	<p>Nonpriority creditor's name and mailing address  <b>Joe Taylor</b>  <b>PO Box 73</b>  <b>Spillville, IA 52168</b></p> <p>Date(s) debt was incurred <u>03/27/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.91	<p>Nonpriority creditor's name and mailing address  <b>John Barnes</b>  <b>1230 Lumpkin Rd</b>  <b>Houston, TX 77043</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.92	<p>Nonpriority creditor's name and mailing address  <b>John Lawrentz</b>  <b>7400 State Route 685</b>  <b>Glouster, OH 45732-9298</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.93	<p>Nonpriority creditor's name and mailing address  <b>John Wylie</b>  <b>2709 North Benton Place</b>  <b>Oak Harbor, WA 98277</b></p> <p>Date(s) debt was incurred <u>04/03/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)
3.94	<p>Nonpriority creditor's name and mailing address  <b>Jon Conger</b>  <b>3942 w 79th street</b>  <b>Indianapolis, IN 46268</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.95	<p>Nonpriority creditor's name and mailing address  <b>jordan bryant</b>  <b>2342 castlecomer dr</b>  <b>Charlotte, NC 28262</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.96	<p>Nonpriority creditor's name and mailing address  <b>Jordan Pries</b>  <b>917 WASHINGTON AVE</b>  <b>Bay city, MI 48708</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.97	<p>Nonpriority creditor's name and mailing address  <b>Jose Avila</b>  <b>908 N Inglewood ave, Apt. 4</b>  <b>Inglewood, CA 90302</b></p> <p>Date(s) debt was incurred <u>03/27/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.98	<p>Nonpriority creditor's name and mailing address  <b>joshua gordon</b>  <b>4971 nw ever road</b>  <b>port saint lucie, FL 34983</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.99	<p>Nonpriority creditor's name and mailing address  <b>Joshua Miranda</b>  <b>603 205th st E.</b>  <b>spanaway, WA 98387</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.100	<p>Nonpriority creditor's name and mailing address  <b>Jr HOLYFIELD</b>  <b>38 Lynn Drive</b>  <b>Oxford, AL 36203</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)	
3.101	<b>Nonpriority creditor's name and mailing address</b> <b>Kelvin Joseph</b> <b>6019 103rd street</b> <b>Lubbock, TX 79424</b> <b>Date(s) debt was incurred</b> <u>04/03/20</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$369.00</b>
3.102	<b>Nonpriority creditor's name and mailing address</b> <b>Kevin Geiling</b> <b>28920 NE 124th ST</b> <b>Duvall, WA 98019</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$579.00</b>
3.103	<b>Nonpriority creditor's name and mailing address</b> <b>KEVIN MCKAY</b> <b>6940 REGATTA DR</b> <b>GRAND PRAIRIE, TX 75054</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15.00</b>
3.104	<b>Nonpriority creditor's name and mailing address</b> <b>Marc Aucoin</b> <b>608 Mardi Gras Ln</b> <b>Port allen, LA 70767</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$599.00</b>
3.105	<b>Nonpriority creditor's name and mailing address</b> <b>Marcus Trejo</b> <b>2112 East william Cannon Dr</b> <b>Austin, TX 78744</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15.00</b>
3.106	<b>Nonpriority creditor's name and mailing address</b> <b>Maria Bracamonte</b> <b>6265 avenue Juan Diaz</b> <b>Jurupa Valley, CA 92509</b> <b>Date(s) debt was incurred</b> <u>03/27/20</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$299.00</b>
3.107	<b>Nonpriority creditor's name and mailing address</b> <b>Mark Elwood</b> <b>325 Gran Ave</b> <b>Homewood, AL 35209</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$999.00</b>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)	
3.108	<b>Nonpriority creditor's name and mailing address</b> <b>Matt Oamilda</b> <b>Atlas industrial 92-508 Awawa St</b> <b>KAPOLEI, HI 96707</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$59.00</b>
3.109	<b>Nonpriority creditor's name and mailing address</b> <b>Matt Palmer</b> <b>1306 West Mount Drive</b> <b>Fircrest, WA 98466</b> <b>Date(s) debt was incurred</b> <u>04/03/20</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$369.00</b>
3.110	<b>Nonpriority creditor's name and mailing address</b> <b>Matthew Hagopian</b> <b>45 Ash Street</b> <b>Reading, MA 01867</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15.00</b>
3.111	<b>Nonpriority creditor's name and mailing address</b> <b>Matthew Mumford</b> <b>8 Wallnut St</b> <b>Warren, PA 16365</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$299.00</b>
3.112	<b>Nonpriority creditor's name and mailing address</b> <b>Matthew Vangaasbeck</b> <b>2968 Campbell St</b> <b>Baker City, OR 97814</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$299.00</b>
3.113	<b>Nonpriority creditor's name and mailing address</b> <b>Michael Adams</b> <b>10705 Elk Lake Drive</b> <b>Las Vegas, NV 89144</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$399.00</b>
3.114	<b>Nonpriority creditor's name and mailing address</b> <b>michael cramer</b> <b>241 Brookfield Ave</b> <b>Staten Island, NY 10308</b> <b>Date(s) debt was incurred</b> <u>03/27/20</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$299.00</b>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)
3.115	<b>Nonpriority creditor's name and mailing address</b> <b>Michael Full</b> <b>4651 Valley Vista Dr.</b> <b>Dublin, CA 94568</b> <b>Date(s) debt was incurred</b> <u>2017-2019</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Loans to company</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$147,000.00</b>
3.116	<b>Nonpriority creditor's name and mailing address</b> <b>michael juodzevich</b> <b>2143 Ridge Street</b> <b>Yorktown Heights, NY 10598</b> <b>Date(s) debt was incurred</b> <u>03/30/20</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$299.00</b>
3.117	<b>Nonpriority creditor's name and mailing address</b> <b>Michael Rynearson</b> <b>1646 El Dorado Way</b> <b>Redding, CA 96002</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$598.00</b>
3.118	<b>Nonpriority creditor's name and mailing address</b> <b>Michael Wagner</b> <b>225 Fallon Road, #339</b> <b>Stoneham, MA 02180</b> <b>Date(s) debt was incurred</b> <u>03/27/20</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$299.00</b>
3.119	<b>Nonpriority creditor's name and mailing address</b> <b>Miguel Guzman</b> <b>6249 tackawanna st</b> <b>Philadelphia, PA 19135</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$299.00</b>
3.120	<b>Nonpriority creditor's name and mailing address</b> <b>Mitchell Smith-Long</b> <b>1805 SE Clay St</b> <b>Albany, OR 97322</b> <b>Date(s) debt was incurred</b> <u>  </u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$599.00</b>
3.121	<b>Nonpriority creditor's name and mailing address</b> <b>Mongoose Armory</b> <b>2600 North Glen DR</b> <b>Clover, NM 88101</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$898.00</b>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)
3.122	<p>Nonpriority creditor's name and mailing address  <b>Nate Norris</b>  <b>9378 S Mason Montgomery Rd, Suite 231 Pm</b>  <b>Mason, OH 45040</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.123	<p>Nonpriority creditor's name and mailing address  <b>Nathan LeRoy</b>  <b>1051 50th street drive</b>  <b>La Porte City, IA 50651</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.124	<p>Nonpriority creditor's name and mailing address  <b>Nathan Wright</b>  <b>2475 Culpepper Ln</b>  <b>China Spring, TX 76633</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.125	<p>Nonpriority creditor's name and mailing address  <b>Nathaniel Lunders</b>  <b>776 South 18th Street</b>  <b>Columbus, OH 43206</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.126	<p>Nonpriority creditor's name and mailing address  <b>NewTek Merchant Solutions</b>  <b>4650 N. Port Washington Road</b>  <b>Milwaukee, WI 53212-1059</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Credit card processing vendor</u></b>  <b><u>[disputed charges / refunds owed on products not shipped by Full Conceal Mfg LLC]</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.127	<p>Nonpriority creditor's name and mailing address  <b>Oleg Carrasco</b>  <b>299 Smithridge park 299</b>  <b>Reno, NV 89502</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.128	<p>Nonpriority creditor's name and mailing address  <b>On target range and guns</b>  <b>Bullseye range</b>  <b>1151 S Cedar Ridge Dr</b>  <b>Duncanville, TX 75137</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b><u>Customer - order not shipped</u></b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)
3.129	<p>Nonpriority creditor's name and mailing address  <b>Owen Margeson</b>  <b>1833 South Ocean Drive Unit 201</b>  <b>Hallandale Beach, FL 33009</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.130	<p>Nonpriority creditor's name and mailing address  <b>P3 Tactical LLC</b>  <b>6981 40th Ave</b>  <b>Hudsonville, MI 49426</b></p> <p>Date(s) debt was incurred <u>04/03/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.131	<p>Nonpriority creditor's name and mailing address  <b>PARVINDER SETHI</b>  <b>1964 GARDNER CIR E</b>  <b>Aurora, IL 60503</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.132	<p>Nonpriority creditor's name and mailing address  <b>Patrick Moran</b>  <b>7918 Restless Wind</b>  <b>San Antonio, TX 78250-4739</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.133	<p>Nonpriority creditor's name and mailing address  <b>Paul Prasarn</b>  <b>615 Owego Road</b>  <b>Candor, NY 13743</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.134	<p>Nonpriority creditor's name and mailing address  <b>Paul Royer</b>  <b>16149 E Montana Pl</b>  <b>Aurora, CO 80017</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.135	<p>Nonpriority creditor's name and mailing address  <b>Pete O'Heeron</b>  <b>17006 Evergreen Elm Way</b>  <b>Houston, TX 77059</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Customer - order not shipped</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)
3.136	<b>Nonpriority creditor's name and mailing address</b> <b>Peter Duran</b> <b>40291 W. Lococo St.</b> <b>Maricopa, AZ 85138</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Customer - order not shipped</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.137	<b>Nonpriority creditor's name and mailing address</b> <b>Peter Lieu</b> <b>1118 18th st</b> <b>Oakland, CA 94607</b> <b>Date(s) debt was incurred</b> <u>03/27/20</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Customer - order not shipped</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.138	<b>Nonpriority creditor's name and mailing address</b> <b>Philip Tree</b> <b>2754 Richardson Street</b> <b>Fitchburg, WI 53711</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Customer - order not shipped</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.139	<b>Nonpriority creditor's name and mailing address</b> <b>Point Blank Range/ Matthews</b> <b>10726 Monroe Rd</b> <b>Matthews, NC 28105</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Customer - order not shipped</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.140	<b>Nonpriority creditor's name and mailing address</b> <b>Pongsakorn Vaivong</b> <b>11915 Casparis</b> <b>San Antonio, TX 78254</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Customer - order not shipped</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.141	<b>Nonpriority creditor's name and mailing address</b> <b>Richard Cummings</b> <b>424 Loudon Road</b> <b>Loudonville, NY 12211</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Customer - order not shipped</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.142	<b>Nonpriority creditor's name and mailing address</b> <b>Rick Murff</b> <b>2210 N Lema Dr</b> <b>Mesa, AZ 85215</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Customer - order not shipped</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)
3.143	<p>Nonpriority creditor's name and mailing address  <b>Rob Hogle</b>  <b>3195 Dayton Xenia Road Ste 900-183</b>  <b>Beavercreek, OH 45434</b></p> <p>Date(s) debt was incurred <u>03/27/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.144	<p>Nonpriority creditor's name and mailing address  <b>Rob Hogle</b>  <b>3195 Dayton Xenia Road Ste 900-183</b>  <b>Beavercreek, OH 45434</b></p> <p>Date(s) debt was incurred <u>04/03/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.145	<p>Nonpriority creditor's name and mailing address  <b>Robert Gemar</b>  <b>415 North 3826 East</b>  <b>Rigby, ID 83442</b></p> <p>Date(s) debt was incurred <u>03/27/20</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.146	<p>Nonpriority creditor's name and mailing address  <b>Robert Gittings</b>  <b>24 West Camelback Road #244</b>  <b>Phoenix, AZ 85013</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.147	<p>Nonpriority creditor's name and mailing address  <b>Robert Perez</b>  <b>Address unknown</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.148	<p>Nonpriority creditor's name and mailing address  <b>Rocky Mountain Pawn</b>  <b>875 E Bridge St</b>  <b>Brighton, CO 80601</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.149	<p>Nonpriority creditor's name and mailing address  <b>Rodrigo Alvarez</b>  <b>1994 1484 Kimball place</b>  <b>Manteca, CA 95336</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>  </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer - order not shipped</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)	
3.150	<b>Nonpriority creditor's name and mailing address</b> <b>Ron Bernstein</b> <b>8175 Arville St</b> <b>Las Vegas, NV 89139</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$449.00</b>
3.151	<b>Nonpriority creditor's name and mailing address</b> <b>Ron Kontowsky</b> <b>15850 27 Mile Road</b> <b>Ray, MI 48096</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$599.00</b>
3.152	<b>Nonpriority creditor's name and mailing address</b> <b>Scott's Pawn &amp; Jewelry</b> <b>873 1st St N</b> <b>Alabaster, AL 35007</b> <b>Date(s) debt was incurred</b> <u>04/03/20</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,047.00</b>
3.153	<b>Nonpriority creditor's name and mailing address</b> <b>Shawn Hoang</b> <b>903 Highridge Ln.</b> <b>Kent, OH 44240</b> <b>Date(s) debt was incurred</b> <u>04/03/20</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$369.00</b>
3.154	<b>Nonpriority creditor's name and mailing address</b> <b>Shawn Oritz</b> <b>7054 Azure Beach st</b> <b>Las Vegas, NV 89148</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$449.00</b>
3.155	<b>Nonpriority creditor's name and mailing address</b> <b>Sherwyn Greenfield</b> <b>2271 165th St</b> <b>Spirit Lake, IA 51360</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$449.00</b>
3.156	<b>Nonpriority creditor's name and mailing address</b> <b>Shooters Emporium</b> <b>1495 S Main St</b> <b>Romeo, MI 48065</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$898.00</b>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)	
3.157	<b>Nonpriority creditor's name and mailing address</b> <b>Stephen Germain</b> <b>821 Franklin St</b> <b>Worcester, MA 01604</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$44.00</b>
3.158	<b>Nonpriority creditor's name and mailing address</b> <b>Stond Rose</b> <b>1080 Amberton Ln</b> <b>Newbury Park, CA 91320</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15.00</b>
3.159	<b>Nonpriority creditor's name and mailing address</b> <b>Taylor Gun Sales</b> <b>PO Box 73</b> <b>Spillville, IA 52168</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$475.00</b>
3.160	<b>Nonpriority creditor's name and mailing address</b> <b>Teresa Reynolds</b> <b>48 W Cumberland</b> <b>Martinsville, IL 62442</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$449.00</b>
3.161	<b>Nonpriority creditor's name and mailing address</b> <b>Thomas Fang</b> <b>11 s wille 408</b> <b>mt prospect, IL 60056</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$114.00</b>
3.162	<b>Nonpriority creditor's name and mailing address</b> <b>Thomas Koh</b> <b>2536 Fairfax Dr #A</b> <b>Arlington, VA 22201</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15.00</b>
3.163	<b>Nonpriority creditor's name and mailing address</b> <b>Tim Miller</b> <b>1536 Deer Moss Court</b> <b>Gulf Breeze, FL 32563</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$599.00</b>

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)
3.164	<b>Nonpriority creditor's name and mailing address</b> <b>Todd Bixby</b> <b>3637 Highway 332</b> <b>Hoschton, GA 30548</b> <b>Date(s) debt was incurred</b> <u>03/27/20</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.165	<b>Nonpriority creditor's name and mailing address</b> <b>Tony Cangelosi</b> <b>6965 E Country Highlands Dr</b> <b>Floral City, FL 34436</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.166	<b>Nonpriority creditor's name and mailing address</b> <b>Tony Cangelosi</b> <b>6965 E Country Highlands Dr</b> <b>Floral City, FL 34436</b> <b>Date(s) debt was incurred</b> <u>04/03/20</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.167	<b>Nonpriority creditor's name and mailing address</b> <b>Tre Lytle</b> <b>5817 nystrom st</b> <b>New Carrollton, MD 20784</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.168	<b>Nonpriority creditor's name and mailing address</b> <b>Tyler Gregory</b> <b>22306 Tees Terrace</b> <b>Ashburn, VA 20148</b> <b>Date(s) debt was incurred</b> <u>03/27/20</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.169	<b>Nonpriority creditor's name and mailing address</b> <b>Tyler Waylett</b> <b>804 Getchell Street</b> <b>Helena, MT 59601</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.170	<b>Nonpriority creditor's name and mailing address</b> <b>Walter Keller</b> <b>Address unknown</b> <b>Date(s) debt was incurred</b> <u>2020</u> <b>Last 4 digits of account number</b> <u> </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Customer - order not shipped</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Full Conceal Inc</b> Name	Case number (if known)	
3.171	Nonpriority creditor's name and mailing address <b>William Driver</b> <b>4051 27th Street N</b> <b>Arlington, VA 22203</b>  Date(s) debt was incurred <u>04/03/20</u>  Last 4 digits of account number <u>  </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Customer - order not shipped</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$399.00</b>
3.172	Nonpriority creditor's name and mailing address <b>William Dyer</b> <b>5391 Saratoga Ave</b> <b>Milton, FL 32570</b>  Date(s) debt was incurred <u>04/03/20</u>  Last 4 digits of account number <u>  </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Customer - order not shipped</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$399.00</b>
3.173	Nonpriority creditor's name and mailing address <b>Yacob Chernet</b> <b>3120 Woodlane Ct</b> <b>Indianapolis, IN 46268</b>  Date(s) debt was incurred <u>2020</u>  Last 4 digits of account number <u>  </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Customer - order not shipped</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$599.00</b>
3.174	Nonpriority creditor's name and mailing address <b>Z Hanging Spur LLC</b> <b>10979 724 RD</b> <b>Oxford, NE 68967</b>  Date(s) debt was incurred <u>2020</u>  Last 4 digits of account number <u>  </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Customer - order not shipped</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,347.00</b>
3.175	Nonpriority creditor's name and mailing address <b>Ziaire Clasper</b> <b>Address unknown</b>  Date(s) debt was incurred <u>2020</u>  Last 4 digits of account number <u>  </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Customer - order not shipped</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$449.00</b>

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1  
5b. Total claims from Part 2

5c. Total of Parts 1 and 2  
Lines 5a + 5b = 5c.

<b>Total of claim amounts</b>	
5a.	\$ <u>120,000.00</u>
5b.	\$ <u>339,448.45</u>
5c.	\$ <u>459,448.45</u>

## Fill in this information to identify the case:

Debtor name **Full Conceal Inc**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**

Case number (if known) \_\_\_\_\_

 Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases****12/15**

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

## 1. Does the debtor have any executory contracts or unexpired leases?

 No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form. Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1. State what the contract or lease is for and the nature of the debtor's interest

**Sublease for 175 Cassia Way, #A1114, Henderson NV 89014 (no money owed - for FFL purposes only)**

State the term remaining

**Full Conceal Mfg LLC  
175 Cassia Way, #A1114  
Henderson, NV 89014**

List the contract number of any government contract \_\_\_\_\_

## Fill in this information to identify the case:

Debtor name **Full Conceal Inc**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**

Case number (if known) \_\_\_\_\_

 Check if this is an amended filing**Official Form 206H  
Schedule H: Your Codebtors****12/15****Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.****1. Do you have any codebtors?**

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
 Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

**Column 1: Codebtor****Column 2: Creditor****Name****Mailing Address****Name****Check all schedules that apply:**

D  
 E/F  
 G

2.1

Street

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

2.2

Street

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

D  
 E/F  
 G

2.3

Street

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

D  
 E/F  
 G

2.4

Street

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

D  
 E/F  
 G

## Fill in this information to identify the case:

Debtor name **Full Conceal Inc**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**

Case number (if known) \_\_\_\_\_

 Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****04/19**

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business** None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue  
Check all that applyGross revenue  
(before deductions and exclusions)From the beginning of the fiscal year to filing date:  
From **1/01/2020** to **Filing Date** Operating a business**\$167,000.00** Other \_\_\_\_\_For prior year:  
From **1/01/2019** to **12/31/2019** Operating a business**\$1,432,104.00** Other \_\_\_\_\_For year before that:  
From **1/01/2018** to **12/31/2018** Operating a business**\$2,966,677.00** Other \_\_\_\_\_**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

 None.

Description of sources of revenue

Gross revenue from  
each source  
(before deductions and  
exclusions)**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

 None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer

Check all that apply

Debtor **Full Conceal Inc**

Case number (if known) \_\_\_\_\_

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer Check all that apply
3.1. <b>Howard &amp; Howard Attorneys PLLC</b> 3800 Howard Hughes Pkwy Suite 1000 Las Vegas, NV 89169	7/24/2020 7/24/2020 10/8/2020 10/9/2020	\$15,085.84	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other _____

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

 None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. <b>Steve Pantalemon</b> 4525 Dean Martin Dr Apt 1212 Las Vegas, NV 89103 Shareholder and former officer	March 2020	\$78,738.00	Unauthorized withdrawal

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

 None

Creditor's name and address	Describe of the Property	Date	Value of property
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**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

 None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

 None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. <b>Full Conceal Inc vs. Steve Pantalemon</b> A-20-813641-C	Breath of duty, conversion, etc.	Eighth District Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

Debtor Full Conceal Inc

Case number (if known) \_\_\_\_\_

 None**Part 4: Certain Gifts and Charitable Contributions**

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

 None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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**Part 5: Certain Losses**

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

 None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
Customer shipments	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).  None	March-APril 2020	\$10,000.00

**Part 6: Certain Payments or Transfers**

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

 None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Atkinson Law Associates Ltd. 376 E Warm Springs Rd Suite 130 Las Vegas, NV 89119	Attorney Fees	10/1/2020	\$2,850.00

Email or website address  
[bknotices@nv-lawfirm.com](mailto:bknotices@nv-lawfirm.com)

Who made the payment, if not debtor?

11.2. Howard & Howard Attorneys,  
PLLC  
3800 Howard Hughes Pkwy  
Suite 1000  
Las Vegas, NV 89169

10/8/2020 \$8,000.00

Email or website address

Who made the payment, if not debtor?

Debtor Full Conceal Inc

Case number (if known) \_\_\_\_\_

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.  
Do not include transfers already listed on this statement.

 None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

 None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1 Full Conceal Mfg LLC 175 Cassia Way Ste #A1114 Henderson, NV 89014	Machinery sold for approximate market value	August 2019	\$22,510.00
Relationship to debtor None			
13.2 Unknown (went through escrow)	VM3 machine	July 2020	\$47,000.00
Relationship to debtor Unknown			

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

 Does not apply

Address	Dates of occupancy From-To
14.1. 4325 Dean Martin Dr., Ste. #325 Las Vegas, NV 89103	Mar 2017 to Aug 2017
14.2. 4325 Dean Martin Dr., Ste. #350 Las Vegas, NV 89103	Aug 2017 to Aug 2019

**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

 No. Go to Part 9. Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
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Debtor Full Conceal Inc

Case number (if known) \_\_\_\_\_

**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

No.  
 Yes. State the nature of the information collected and retained.

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

No. Go to Part 10.  
 Yes. Does the debtor serve as plan administrator?

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Debtor Full Conceal Inc

Case number (if known) \_\_\_\_\_

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No.  
 Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

No.  
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

No.  
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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#### Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
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Dates business existed

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

None

Name and address	Date of service From-To
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26a.1. **Danny Dodiya**  
**India (outsourced accounting)**

26a.2. **Carol T. Lechner**  
**7545 Oso Blanca Rd. #1189**  
**Las Vegas, NV 89149**

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

Debtor Full Conceal Inc

Case number (if known) \_\_\_\_\_

**Name and address****Date of service  
From-To**

26b.1. **Prestige Accounting**  
**11740 Dublin Blvd Suite 200**  
**Dublin, CA 94568**

**Name and address****Date of service  
From-To**

26b.2. **Michael Matthews**  
**2620 Regatta Dr., Suite 102**  
**Las Vegas, NV 89128**

**Name and address****Date of service  
From-To**

26b.3. **Campbell Jones Cohen CPAs**  
**7848 West Sahara Ave**  
**Las Vegas, NV 89117**

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

None

**Name and address****If any books of account and records are  
unavailable, explain why**

26c.1. **Prestige Accounting**  
**11740 Dublin Blvd Suite 200**  
**Dublin, CA 94568**

26c.2. **Danny Dodiya**  
**India (outsourced accounting)**

26c.3. **Michael Full**  
**4651 Valley Vista Dr**  
**Dublin, CA 94568**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

None

**Name and address****27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No

Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
27.1 <b>Leeor Engelstein (done verbally)</b>	<b>Feb 2020</b>	

**Name and address of the person who has possession of  
inventory records**

**Leeor Engelstein**  
**c/o Full Conceal Mfg LLC**  
**175 Cassia Way Ste A1114**  
**Henderson, NV 89014**

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Debtor Full Conceal Inc

Case number (if known) \_\_\_\_\_

Name	Address	Position and nature of any interest	% of interest, if any
Michael Full	4651 Valley Vista Dr Dublin, CA 94568	Sole director and officer	51%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No  
 Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
Steve Pantalemon	4525 Dean Martin Drive Apt 1212 Las Vegas, NV 89103	Former officer and director	Resigned 3/30/2020

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No  
 Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 Steve Pantalemon 4525 Dean Martin Drive Apt 1212 Las Vegas, NV 89103	\$78,738	March 2020	Withdrew funds without authorization, claiming for unapproved deferred salary, unapproved expenses, and unapproved personal distribution
Relationship to debtor Former officer			

30.2 Michael Full 4651 Valley Vista Dr Dublin, CA 94568	2 months' salary	4/16/2020 to 6/22/2020	Michael had been working without drawing any salary for over a year
Relationship to debtor Officer, director, and majority shareholder			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

No  
 Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

Debtor Full Conceal Inc

Case number (if known) \_\_\_\_\_

**32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?**

No  
 Yes. Identify below.

Name of the pension fund

Employer identification number of the parent corporation

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.  
 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 13, 2020

/s/ Michael Full  
 Signature of individual signing on behalf of the debtor

Michael Full  
 Printed name

Position or relationship to debtor CEO

**Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?**

No  
 Yes

**United States Bankruptcy Court**  
**District of Nevada**

In re **Full Conceal Inc**

Debtor(s)

Case No.

Chapter

7

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$ <b>2,850.00</b>
Prior to the filing of this statement I have received .....	\$ <b>2,850.00</b>
Balance Due .....	\$ <b>0.00</b>

2. The source of the compensation paid to me was:

Debtor  Other (specify):

3. The source of compensation to be paid to me is:

Debtor  Other (specify):

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  
 I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

**Per fee agreement.**

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:  
**Per fee agreement.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

October 13, 2020

*Date*

**/s/ Robert Atkinson**

**Robert Atkinson 9958**

*Signature of Attorney*

**Atkinson Law Associates Ltd.**

**376 E Warm Springs Rd Suite 130**

**Las Vegas, NV 89119**

**(702) 614-0600 Fax: (702) 614-0647**

**[bknotices@nv-lawfirm.com](mailto:bknotices@nv-lawfirm.com)**

*Name of law firm*

**United States Bankruptcy Court  
District of Nevada**

In re Full Conceal Inc

Debtor(s)

Case No.

Chapter

7

**VERIFICATION OF CREDITOR MATRIX**

I, the CEO of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: October 13, 2020

/s/ Michael Full

**Michael Full/CEO**

Signer/Title

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Alex Martin  
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hobe sound, FL 33455

Alhareth AlSalman  
23314 nocturnal ct  
Katy, TX 77493

American Express National Bank  
Acct No 52741627910207662100  
c/o: Datamark Inc.  
Attn: Merchant Financing Counsel  
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EL Paso, TX 79906

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Galivants Ferry, SC 29544-6831

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Ziaire Clasper  
Address unknown

**United States Bankruptcy Court  
District of Nevada**

In re **Full Conceal Inc**

Debtor(s)

Case No.  
Chapter

**7**

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for Full Conceal Inc in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

■ None [Check if applicable]

**October 13, 2020**

Date

**/s/ Robert Atkinson**

**Robert Atkinson 9958**

Signature of Attorney or Litigant

Counsel for **Full Conceal Inc**

**Atkinson Law Associates Ltd.**

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**(702) 614-0600 Fax:(702) 614-0647**

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